r i de la companya d	genization) ZOUN HAY 16 AH 3 58 P		FORM DR-2 (Rev. 01/2001) For Office Use Only Comm. # Indexed Audited Computer
SIGNATURE OF TREASURER (or person filing this report	(515)210-89 TELEPHONE	141	Mary 16, 7008 DATE SIGNED
I AM FILING A TOO S (report date) CHECK IF AMENDMENT TO REPORT DATED Check if this is final (termination) report and attach Notice of Discovery Continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to file reports until a Notice of Discovery Check in the continue to the continue	REPORT FOR AN/A (1) ELE	dicate o	
STATEMENT CASH ON HAND at the beginning of the reporting period. (The bythe committee. This amount MUST be the same a of the last reporting period, or must be zero if this is find ADD TOTAL MONEY TAKEN IN THIS PERIOD. Schedule A: Cash Contributions total (Attach Schedule Schedule F: Loans Received total (Attach Schedule F: Schedule H: Total Sales of Campaign Property (Attach Schedule H applies to Candidates' Committee Candidates' Committee Cash Contributions to Candidates' Committee Candidates' Committee Candidates' Committee Cash Candidates' Committee Cash Cash Candidates' Committee Cash Cash Candidates' Committee Cash Cash Candidates' Committee Cash Cash Cash Candidates' Committee Cash Cash Cash Cash Cash Cash Cash Cash	is the cash on hand at the end ist report filed.)	\$	*1860°
SUBTRACT TOTAL MONEY SPENT THIS PERIOD Schedule B: Expenditures total (Attach Schedule B) (Schedule F: Loan Repayments total (Attach Schedule CASH ON HAND at the end of this reporting period (If final reporting period) (Attach DR-3)	SUB-TOTA **also see debts and loans belo F)	ow)	Ø
*UNPAID BILLS (From Schedule D - Attach Schedule D) IN KIND CONTRIBUTIONS (From Schedule E - Attach Schedule *OUTSTANDING LOANS (From Schedule F - Attach Schedule *ANDIDATE COMMITTEES ONLY: ONSULTANT BREAKDOWN (Schedule G Attached?)	ıle E)	s	<i>'</i> Ø

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MAY-13-2003 11:31

1A ETHICS CAMPAIGN DISCLO

For Instructions, See Back of Form

CONTRIBUTIONS - MONEY TAKEN IN

(including candidate's personal funds)

COMMITTEE NAME (Must be same as on Statement of Organization) UNITED STATE UNION OF TOWN POLITICAL ACTION FUND

2813701 P.03			
SCHEDULE			
A (Rev. 05/97)	MONETARY RECEIPTS		
	CK THIS BOX IF NOING FORM		

STATE CANDIDATES NOTE: IF A CONTRIBUTION IS RECEIVED FROM A STATE PAC (POLITICAL ACTION COMMITTEE), LIST THE PAC IDENTIFICATION NUMBER AND THE PAC CHECK NUMBER IN THE DESIGNATED COLUMN. A LIST OF IO NUMBERS IS AVAILABLE FROM THE IOWA ETHICS AND CAMPAIGN. DISCLOSURE BOARD.

CAUTION: Section 68B.32A(6), lower Code, prohibits the use of information copied from reports and statements for soliciting contributions or for any commercial purpose by any person other than statutory political committees.

DATE RECEIVED (MM/DD/YR)	PAC ID NUMBER (I' applicable) AND PAC CHECK NUMBER	NAME AND ADDRESS OF CONTRIBUTOR	RELATIONSHIP TO CANDIDATE* (If applicable)	AMOUNT RECEIVED	J IF FOR FUND- RAISER INCOME
1]18/08	ID# CK#	UNITED STAFF UNION OF TOWA 4320 NW SELDND ALE DECE	n BER	3600	
	(Da) CKN	HOTTED SAME SHOULD AUG DECEL DES MUINES TA SO313 DU HE ABOUE		35000	
3/10/08	ID#	AS ABOVE FEBRUARY DUE	•	36000	
3/18/08 4/ <i>15/</i> 08	CK#	AS ABOVE MARCH DUES		39000	
5/7/08	ID#	AS ABOVE APRIL DUES		4000	·
	ID#				
	CK#				
	ID#				·
	ID#	·			•
	CK#				
		<u>kanan da </u>	SUB-TOTAL	\$ 1860	

TOTAL (If last page of this schedule)

^{*} Disclosure law requires candidate committees to disclose the relationship of any relative making a contribution to the committee. Religionship must be shown to the third degree of cornerquently (blood relatives) and attacky (needwee by markage) (See Page 2 of forms packet.). If surname of contributor is the same se candidate, but there is no femilial relationship, anter "not applicable" in the relationship column.

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FOR INSTRUCTIONS, SEE BACK OF FORM

Reset Form

EXPENDITURES -- MONEY SPENT FROM COMMITTEE ACCOUNT

STATE PAC COMMITTEES: NOTE: FOR CONTRIBUTIONS MADE TO STATEWIDE OR LEGISLATIVE CANDIDATES, LIST THE CANDIDATE IDENTIFICATION NUMBER IN THE DESIGNATED COLUMN AND THE PAC CHECK NUMBER FOR EACH EXPENDITURE. A LIST OF ID NUMBERS IS AVAILABLE FROM THE IOWA ETHICS & CAMPAIGN DISCLOSURE BOARD.

COMMITTEE NAME (Must be same as on Statement of Organization)

SCHEDULE				
В	MONETARY			
(Rev. 07/03)	EXPENDITURES			
CHECK THIS BOX IF AMENDING FORM				

UNITED STAFF UNION OF JUNA POLITICAL ACTION FUND AMOUNT NAME AND ADDRESS TO WHOM PURPOSE CANDIDATE **EXPENDED** (DESCRIBE TRANSACTION) **EXPENDITURE** ID NUMBER DATE (Disbursement) WAS MADE EXPENDED (if applicable) AND PAC (MM/DD/YR) CHECK NUMBER ID# SIEGEL FOR SUFERVISOR 411 NORTH COURT POLITICAL \$ 5000 OHumwa TA 52501 4/15/08 CK# 1003 CONTRIBUTION ID# CK# ID# CK# D# CK# ID# CK# ID# CK# ID# CK#

TOTAL (if last page of this schedule)

SUB-TOTAL

\$ 500	$\frac{2}{2}$
\$ 500	00

THIS BOX APPLIES TO CANDIDATES' COMMITTEES ONLY:

ID#

CK#

Purchases of certain campaign property coating \$500 or more must also be inventoried on Schedule H. (Refer to Schedule H instructions.)

Expenditures to persons/entities providing consulting, advertising, fund-raising, polling, managing, organizing services must also be detail itemized on Schedule G by the amount, purpose, and date of each type of expenditure made by the person/entity on behalf of the candidate's committee. (Refer to Schedule G instructions and lowa Code 68A.402(3)(i).)

Page	/	af	/	
3-		-		